



# Greenville City Fire Department

206 South Main St.  
Greenville, S.C. 29602  
864-467-4445

## Citizens Fire Academy APPLICATION October 2016

Name:

Last

First

Middle Initial

Address:

Street/Apt

City

State

Zip

Home Phone:

Cell/Other Phone:

Email:

Date of Birth:

Shirt Size:

Driver's License Number:

State:

Currently Valid?

Yes

No

Have you ever been convicted of a felony?    Yes    No

Employer:

Address:

Street

City

State

Zip

**What do you expect to get out of the Citizens Fire Academy?**

*For Emergency Fire Service, call 911*

**STATE OF SOUTH CAROLINA )**

**COUNTY OF )**

**RELEASE**

I, \_\_\_\_\_, am applying to be a participant in the City of Greenville Citizens Fire Academy (CFA). I acknowledge that my participation will not only include classroom lectures but hands-on exercises as well. In consideration of my being permitted to attend the CFA, I agree to assume all risks associated with my participation, and release and hold harmless the City of Greenville, its officers, agents and employees from and against any and all claims, damages, liabilities, cost and expenses, including attorney's fee, arising out of my participation, including without limitation any personal or bodily injuries or property damage that I may incur as a result of the actions of myself or other persons.

I further agree to abide by all rules and instructions given by the City, its officers, agents or employees with respect to my participation and my failure to do so may result in my termination from CFA. Furthermore, for the above described consideration, I further promise to bind myself, my heirs, administrators, and executors to repay to the City of Greenville any sum of money that the City of Greenville may be compelled to pay because of damages that result from my negligence, gross negligence, willful or wanton conduct, or failure to abide by all rules and instructions given by the City, its officers, agents or employees with respect to my participation.

- I understand the Greenville Citizens Fire Academy will meet every Tuesday night from 6:30 p.m. until 9:30 p.m. for (7) weeks beginning on October 4, 2016 and concluding on November 15, 2016.
- I understand individuals selected to participate in the Academy are expected to attend all sessions and to participate in class activities.
- I understand I must be willing to commit to these attendance requirements for the entire duration of the program in order to successfully complete graduation requirements.
- I understand I may miss no more than one (1) class for any reason during the term of the academy in order to be eligible for graduation.
- I understand that, should circumstances cause me to miss more than one (1) classes, I will be afforded the opportunity to make up missed classes in next year's Academy, after which I will be eligible for official graduation from that Academy class.
- I understand that I will be subject to a criminal background inquiry before being accepted into the program. Those having arrest and conviction histories that include a felony, a misdemeanor of violence or moral turpitude, etc. are not eligible to participate.
- I understand the Fire Chief reserves the right to exclude any applicant from consideration whose participation is deemed not to be in the best interests of the City of Greenville Fire Department and/or the applicant.
- All Applications need to be filled out and returned to The City of Greenville Fire Department 206 South Main St. Greenville, S.C. 29602 or faxed to 1-864-467-5790 no later than Monday September 26, 2016

**I HAVE READ AND UNDERSTAND THE CONDITIONS ASSOCIATED WITH THIS APPLICATION  
AND PARTICIPATION IN THE GREENVILLE CITY FIRE DEPARTMENT'S  
CITIZENS FIRE ACADEMY.**

The undersigned hereby warrants and represents that he/she is more than 18 years of age,  
of full legal capacity, and fully understands the foregoing terms.

IN WITNESS WHEREOF, I hereunto set my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 2015.

**I HAVE READ THE FOREGOING RELEASE AND ACCEPT THE TERMS HEREOF  
AS WITNESSED BY THE SIGNATURES HEREON.**

**NOTICE: READ ENTIRE APPLICATION BEFORE SIGNING**

**APPLICANT:**

**WITNESS:**

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*